PTO/SB/21 (08-08)

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FORM	

(to be used for all correspondence after initial filing)

otal Number of Pages in This Submission

Application Number 10/511,582

Filing Date October 18, 2004

First Named Inventor Epke BOSMA

Art Unit 3643

Examiner Name Son T. Nguyen

Attorney Docket Number 19200-000041/US

ENCLOSURES (check all that apply)										
Fee Transmittal F	orm	☐ Drawing(s)					After Allowance Communication to Technology Center (TC)			
Fee Attached		Licensing-related Papers			elated Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Rep	ply	Petition					Appeal Communication to TC (Appeal Notice, Appeal Brief, Reply Brief)			
After Final		Petition to Convert to a Provisional Application					Proprietary Information			
Affidavits/dec	laration(s)	Power of Attorney, Revocation Change of Correspondence Address					Status Letter			
Extension of Time	Extension of Time Request		Other Enclosure(s) (please identify below):							
Express Abandonment Request		Request for Refund					<ul> <li>Request for Oral Hearing Before the Board of Appeals</li> </ul>			
		╙	_		er of CD(s)					
Information Disclo	n Disclosure Statement Landscape Table on CD									
Document(s) fees that may be re			may be requi	hereby authorized to charge any additional ired under 37 CFR 1.16 or 1.17 to Deposit A duplicate copy of this sheet is enclosed.						
Response to Missing Parts/ Incomplete Application			MAILSTOP: Appeal Briefs - Patents							
Response to Missing Parts under 37 CFR										
1.52 or 1.53					<u>/</u>					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm Name	Harness, Dickey &	ier	ce,	L.C.						
Signature		$\Lambda$								
Printed name	John A. Castellano									
Date	November 12, 2009				Reg. No.	35,094				
CERTIFICATE OF TRANSMISSION/MAILING										

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450,

Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name Express Mail Label No.

Signature Date

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## **FEE TRANSMITTAL** for FY 2009

Effective 2/8/2006. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	1080
(D)	1000

Complete if Known						
Application Number	10/511,582					
Filing Date	October 18, 2004					
First Named Inventor	Epke BOSMA					
Examiner Name	Son T. Nguyen					
Art Unit	3643					
Attorney Docket No.	19200-000041/US					

METHOD OF PAYMENT (check all that apply)			T	FEE CALCULATION (continued)						
		3. AD	3. ADDITIONAL FEES							
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order			Large	Entity :	Sm	all Entity	t .			
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Number						or cover sheet.	F			
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	litional fee(s) during the pendency of this a ndicated below, except for the filing fee	pplication	1251	130	2251	65	Extension for re	ply within first month		
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	012 110 Design filing fee		1403	1,080	2403	540	Request for oral	•	1080	
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1 1 -	014 165 Reissue filing fee		1462	400	2453 1462	400		e – unintentional		
1005 220 2005 110 Provisional filling fee		1463	200	1463	200		n fee under 37 CFR 1.17(f) n fee under 37 CFR 1.17(g)			
İ	SUBTOTAL (1)	\$) 0	1464	130	1464	130		er 37 CFR 1.17(g) er 37 CFR 1.17(h)		
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2. EXTRA CLA	M FEES FOR UTILITY AND REISSU		1807	50	1807	50	-	under 37 CFR 1.17 (q nformation Disclosure	' <del> </del>	
1	Extra Fee from Claims below	Fee Paid	1806	180	1806	180	Stmt	normation Disclosure		
Total Claims	- ** = 0 X ==						Recording each	patent assignment		
Independent Claims	- ** = 0 X ==	: 0	8021	40	8021	40	per property (time properties)	nes number of		
Multiple			1809	810	2809	405	Filing a submiss	sion after final rejection 9(a))	n	
Dependent  Large Entity	Small Entity		1810	810	2810	405		nal invention to be		
Fee Fee Code (\$)	Fee Fee Fee Description		1801	810	2801	405		inued Examination		
1202 52	2202 26 Claims in excess of 20		Other fo	ee (speci	fy)	_	(1102)			
1201 220	2201 110 Independent claims in ex		*Redu	ced by E	Basic Fili	na Fee	Paid SUBT	OTAL (3) (\$)10	80	
1203 390	2203 195 Multiple dependent claim		1	•		-	N FEES	(1)		
1204 220	2204 110 ** Reissue independent of original patent	ciaims over	1111	540 I	2111	270	Utility Search Fe	ne .		
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	SUBTOTAL (2) (\$) 0		1311	220	2311	110	Utility Examinati	on Fee		
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/ Y \ <i>A</i>			1314	650	2314	325	Reissue Examin			
or number previously paid, if greater; For Reissues, see above							SU	BTOTAL (4) (\$)0		
SUBMITTED BY							Com	plete (if applicable)		
Name (Print/Type)	John A. Castellano / Regi	stration flo. Iney/Agent)		35,	,094		Telephone	703-668-8000		
Signature			-			Date November 12, 2009				